LOCAL TELEPHONE COMPANY

ANNUAL REPORT

RECEIVED

OF THE

ARK PUBLIC SERVICE COMM AUDIT SECTION

NAME	Prairie	Grove	Telephone	Company	
_	(Here	show in fu	I the exact corpora	ate, firm or individual name of the respondent)	

LOCATED AT 139 N. Mock St.; Prairie Grove, AR 72753

(Here give the location, including street and number of the respondent's main business office within the State)

COMPANY# 132

(Here give the APSC-assigned company number)

TO THE

ARKANSAS PUBLIC SERVICE COMMISSION



COVERING ALL OPERATIONS

FOR THE YEAR ENDING DECEMBER 31, 2014

LETTER OF TRANSMITTAL

To: Arkansas Public Service Commission Post Office Box 400 Little Rock, Arkansas 72203-0400	
Submitted herewith is the annual report covering the oper of 139 N. Mock St.; Prairie Grove for the year en (Location) Arkansas accordance with Section 51 of Act 324 of the 1935 Acts of The following report has been carefully examined by me,	(Company) nding December 31, 2014. This report is submitted in f
	Rink (Signature)
WHICH HERE E	Sec./Trea. & General Manager (Title)
VERIF	FICATION
STATE OF)	
COUNTY OF)	
I, the undersigned, Rick Reed, Sec./Trea	& General Manager of the ne and Title)
Prairie Grove Telephone Company, on my oath o	do say that the following report has
been prepared under my direction from the original books carefully examined the same, and declare the same a conaffairs of said utility in respect to each and every matter a information, and belief; and I further say that no deduction and that accounts and figures contained in the foregoing transactions for the period in this report.	mplete and correct statement of the business and nd thing set forth, to the best of my knowledge, ns were made before stating the gross revenues,
Subscribed and sworn to before me this 6th day of March 2015 My Commission Expires 892019	Conda M. Rouse (Signature of Notary)

GENERAL INSTRUCTIONS, DEFINITIONS, ETC.

1	Two (2) copies of this report, properly filled out and verified shall be filed with the Utility Division of the Arkansas Public Service Commission, Little Rock, Arkansas, on or before the 31st day of March following the close of the calendar year for which the report is made.
2	The word "respondent" in the following inquiries means the person, firm, association or company in whose behalf the report is made.
3	If any schedule does not apply to the respondent, such fact should be shown on the schedule by the words "not applicable."
4	Except in cases where they are especially authorized, cancellations, arbitrary check marks, and the like must not be used either as partial or entire answers to inquiries.
5	Reports should be made out by means which result in a permanent record. The copy in all cases shall be made out in permanent black ink or with permanent black typewriter ribbon. Entries of a contrary or opposite character (such as decreases reported in a column providing for both increases and decreases) should be shown in red ink or enclosed in parentheses.
6	This report will be scanned in, Please bind with clips only.
7	Answers to inquiries contained in the following forms must be complete. No answer will be accepted as satisfactory which attempts by reference to any paper, document, or return of previous years or other reports, other than the present report, to make the paper or document or portion thereof thus referred to a part of the answer without setting it out. Each report must be complete within itself.
8	In cases where the schedules provided in this report do not contain sufficient space or the information called for, or if it is otherwise necessary or desirable, additional statements or schedules may be inserted for the purpose of further explanation of accounts or schedules. They should be legibly made on paper of durable quality and should conform with this form in size of page and width of margin. This also applies to all special or unusual entries not provided for in this form. Where information called for herein is not given, state fully the reason for its omission.
9	Schedules supporting the revenue accounts and furnishing statistics should be so arranged as to effect a division in the operations as to those inside and outside the state.
10	Answers to all inquiries may be in even dollar figures, with cents omitted and with agreeing totals.
11	Each respondent should make its report in duplicate, retaining one copy for its files for reference, in case correspondence with regard to such report becomes necessary. For this reason, several copies of the accompanying forms are sent to each utility company concerned.

Give the name, title, office address, telephone number and e-mail address of the person to whom any correspondence concerning this report should be addressed:					
Name Rick Reed Title Sec./Trea. & General Manager					
Address 139 N. Mock St.; Prairie Grove, AR 72753					
Telephone Number479-846-7227					
E-Mail treed@pgtc.com					
Give the name, address, telephone number and e-mail address of the resident agent:					
Name Telephone Number					
Address					
E-Mail					

IDENTITY OF RESPONDENT

1.	Give the exact name by which respondent was known in law at the close of the year. Use the initial word "The" only when it is part of the name:			
	Prairie Grove Telephone Company			
2.	Give the location (including street and number) of (a) the main Arkansas business office of respondent at the close of the year, and (b) if respondent is a foreign corporation, the main business office if not in this state:			
	(a) 139 N. Mock St. (b) Prairie Grove, AR 72753			
3.	Indicate by an \mathbf{x} in the proper space (a) the type of service rendered, and (b) the type of organization under which respondent was operating at the end of the year.			
	(a) () Electric, () Gas, () Water, (XX) Telephone, () Other			
	(b) () Proprietorship, () Partnership, () Joint Stock Association, (XX) Corporation, () Other (describe below):			
4.	If respondent is not a corporation, give (a) date of organization, and (b) name of the proprietor or the names of all partners, and the extent of their respective interest at the close of the year.			
	(a) N/A			
	(b)			
5.	If a corporation, indicate (a) in which state respondent is incorporated, (b) date of incorporation, and (c) designation of the general law under which respondent was incorporated, or, if under special charter, the date of passage of the act:			
	(a) Arkansas			
	(b) 4 Oct. 1906			
	(c) Sub-Chapter S Corp.			
6.	State whether or not respondent during the year conducted any part of its business within the State of Arkansas under a name or names other than that shown in response to inquiry No. 1 above, and, if so, give full particulars:			
	No			

7.	for e	te whether respondent is a consolidated or merged company. If so, (a) give date and authority each consolidation or merger, (b) name all constituent and merged companies, and (c) give like ticulars as required of the respondent in inquiry No. 5 above:	
	(a)	N/A	
	(b)		
	(c)		
8.	(b) the	te whether respondent is a reorganized company. If so, give (a) name of original corporation, date of reorganization, (c) reference to the laws under which it was reorganized and (d) state occasion of the reorganization, whether because of foreclosure of mortgage or otherwise, ng full particulars.	
	(a)	N/A	
	(b)		
	(c)		
	(d)		
9.		s respondent subject to a receivership or other trust at any time during the year? o, state:	No
	(a)	Name of receiver or trustee:	
	(b)	Name of beneficiary or beneficiaries for whom trust was maintained:	
	(c)	Purpose of the trust:	
	(d)	Give (1) date of creation of receivership or other trust, and (2) date of acquisition of respondent: (1) (2)	
10.		the respondent act in any of the capacities listed in Paragraph (a) below during the tyear? If so,	
	(a)	Indicate the applicable one by an X in the proper space:	
		 () Guarantor, () Surety, () Principalobligor to a surety contract, () Principalobligor to a guaranty contract. 	
	(b)	Insert a statement showing the character, extent, and terms of the primary agreement or obligation, including (1) names of all parties involved, (2) extent of liability of respondent, whether contingent or actual, (3) extent of liabilities of the other parties, whether contingent or actual, and (4) security taken or offered by respondent.	

DIRECTORS

Give the name and office addresses of all directors at the close of the year, and dates of beginning and expiration of terms. Chairman (*) and Secretary (**) marked by asterisks.

Name of Director	Office Address	Date	Date of Term		
Name of Director	Office Address	Beginning	End		
David M. Parks*	Prairie Grove, AR	1-1-2014	12-31-2014		
Susan Parks-Spencer	Prairie Grove, AR	1-1-2014	12-31-2014		
Karen Parks-Gerwig	Prairie Grove, AR	1-1-2014	12-31-2014		
Tyrus R. Reed**	Prairie Grove, AR	1-1-2014	12-31-2014		
		1			

PRINCIPAL OFFICERS AND KEY MANAGEMENT PERSONNEL

Give the title of the principal officers, managers and key personnel, the names and office addresses of persons holding such positions at the close of the year.

Title	Name of person holding office at close of year	Office Address	
President	David M. Parks	Prairie Grove, AR	
Secretary/Treasurer & General Mgr.	Tyrus R. Reed	Prairie Grove, AR	
Office Manager	Elaine Clayton	Prairie Grove, AR	
Outside Plant Manager	Shane Bell	Prairie Grove, AR	
Central Office Supervisor	Jerry Boyd	Prairie Grove, AR	
Accountant	Rhonda Rouse	Prairie Grove, AR	
Marketing Manager	Dale Reed	Prairie Grove, AR	

GROSS ASSESSABLE REVENUES	
Description	Amount
ARKANSAS GROSS ASSESSABLE REVENUES (excluding Interstate Tolls)	5,785,182

LOCAL EXCHANGE SERVICE STATISTICS

ACCESS LINES	ARKANSAS
Residence	5267
Business	1206
TOTAL RESIDENTIAL & BUSINESS ACCESS LINES	6473
PBX Access Lines	21
Coin or Credit Card Paystation Access Lines	10
Company Official Access Lines (Numbers)	153
TOTAL ACCESS LINES	6657

STATEMENT OF ACCURACY

I do hereby state that the amounts contained in this report are true and accurate, schedules have been cross-referenced by use of the attached check list, and that the accuracy of all totals has been verified by me or under my supervision. Should I or anyone under my supervision become aware of any error in or omission from this report, I will take steps to notify the Arkansas Public Service Commission of such error or omission and provide corrected schedules as soon as possible.

President/General Manager

COMPANY CONTACTS

Company Information				
Company Name Prairie Grove Telephone Company				
dba	PGTelco			
Official Mailing Address	P.O. Box 1010 Prairie Grove, AR 72753			
Mailing Address for APSC Annual Assessment Invoice	P.O. Box 1010 Prairie Grove, AR 72753			

AREA	PERSON TO CONTACT	PHONE #	FAX#	E-MAIL
Annual Report	Rick Reed	4798467227	4792671112	treed@pgtc.com
APSC Annual Assessment	Rick Reed	4798467227	4792671112	treed@pgtc.com
Tariffs	Dale Reed	4798467248	4792671112	treed@pgtc.com
Property Taxes	Rick Reed	4798467227	4792671112	treed@pgtc.com
Regulatory Affairs	Rick Reed	4798467227	4792671112	treed@pgtc.com

Please list the number of utility employees located in Arkansas	33	
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